



Chlamydia

Chlamydia is an infection of the reproductive organs caused by the bacterium *Chlamydia trachomatis*. It is a common condition and there are no clear risk factors.

It often occurs in young adults; simply changing sexual partners can put anyone at risk.

If chlamydia is not diagnosed soon after infection, complications may occur in both women and men. Fortunately, it can be simply and effectively treated.

Symptoms

Most people with chlamydia do not have any symptoms and are unaware they have the infection. Chlamydia can be detected by a test at an STD check-up.

Symptoms that may occur:

- **In males**, chlamydia may cause urethritis, which can produce a discharge from the penis or pain when urinating. If not treated, it can lead to inflammation near the testes, which can cause considerable pain, and may lead to infertility.
- **In females**, infection often starts in the cervix. Symptoms such as a vaginal discharge, burning when passing urine, lower abdominal pain, or pain during sexual intercourse may occur. If chlamydia is not treated, it may spread through the uterus to the fallopian tubes, causing salpingitis, a painful condition which may result in infertility or ectopic pregnancy (where the pregnancy develops outside the uterus. This is potentially a life threatening condition.) In some cases, infection of the whole reproductive system—pelvic inflammatory disease (PID)—can occur.
- **In both sexes**, infection may be present in either the throat or the rectum (anus). In both of these sites, there are usually no symptoms.

Transmission

Chlamydia is sexually transmitted, usually through vaginal intercourse. Occasionally it is transmitted by oral sex and anal sex. Chlamydia can be passed from mother to child during birth, causing eye infections (conjunctivitis) or pneumonia.

Diagnosis

Chlamydia is best diagnosed from swab tests, collected from the cervix in women or the urethra in men. Swabs can also be taken from the throat or rectum if there is a possibility of infection there.

A urine test can be used to screen men for chlamydia, if they have no symptoms of the disease. This test is not as sensitive as a swab test and is not recommended for women.

Chlamydia cannot be diagnosed from a blood test.

Treatment

Chlamydia can be treated with antibiotics such as azithromycin (Zithromax) or doxycycline (Doryx, Vibramycin).

Notes on azithromycin

Directions:

Take one gram of azithromycin as a single dose.

Side Effects:

Azithromycin may cause abdominal pain and nausea. If this happens, eating sometimes helps. The symptoms usually settle within a few hours.

Important!

Do not have sex until at least a week has passed. If your partner receives treatment for chlamydia, do not have sex until at least a week after both of you have been treated.

Azithromycin can affect the oral contraceptive pill. Having sex in the week after treatment may increase the risk of pregnancy.

Notes on doxycycline

Directions:

Take a single dose of two capsules daily for 10 days.

Take the capsules after a meal.

Drink a full glass of water when taking the capsules, and do not lie down for at least half an hour.

Side Effects:

The main side effect of doxycycline is irritation of the stomach. If you follow the instructions but experience abdominal pain after taking doxycycline, try taking two daily doses of one capsule. Stomach irritation is less likely if you avoid alcohol.

Doxycycline may make the skin more sensitive to sunlight. Avoid direct sunlight, and wear a hat, long sleeves and sunscreen while you are taking the capsules.

Important!

Do not have sex you have finished taking all the tablets. If your partner receives treatment for chlamydia, do not have sex until at least a week after both of you have been treated.

Never share your treatment with anyone else. Partners should be examined by a doctor to check if they require treatment too.

Doxycycline must never be taken by young children or women who are pregnant or breast feeding.

Further sex

Do not have sex while taking the tablets, or for one week after treatment with azithromycin. There may still be a risk of transmitting the

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infection to sexual partners during this time.

For men, symptoms such as discharge, stinging or irritation will settle down more quickly if you do not have sex (vaginal, oral or anal), masturbate, or squeeze or milk the penis.

Follow-up

Sexual partner(s) should be tested for chlamydia, even if they have no symptoms. If your partner receives treatment, do not have intercourse until a week after both of you have been treated.

If you have been diagnosed with chlamydia, you should have a blood test in three months to detect blood-borne infections you might have contracted at the time you had chlamydia.

Prevention

Use a condom. A condom worn during intercourse provides good protection against chlamydia infection.

Have an STD check-up, including a chlamydia test:

- after sex with a new or casual partner
- **immediately** if symptoms occur, eg discharge, pain when passing urine
- if a sexual partner has chlamydia or symptoms of chlamydia.

Remember, most people with chlamydia do not know they are infected and continue to have sex. Practising safe sex and being checked regularly for chlamydia, especially if you change partners, are the most effective ways of protecting yourself.

More information

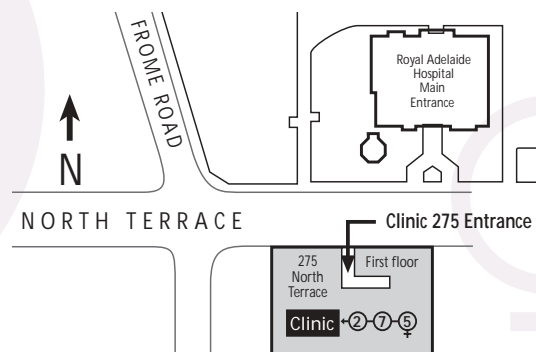
STD Services web site:
www.stdservices.on.net/std/chlamydia

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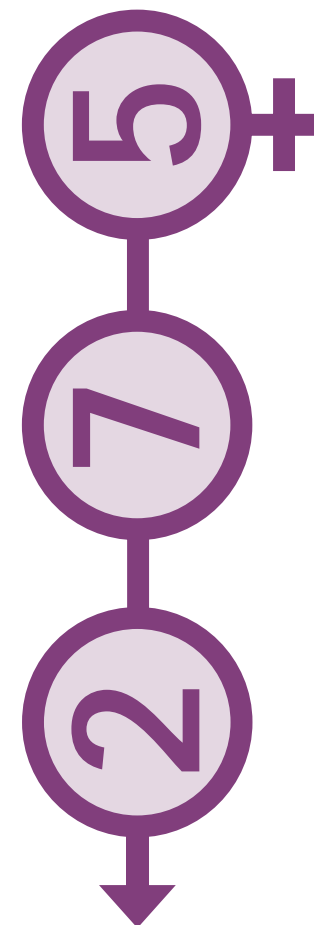
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STD Services June 2007



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Royal Adelaide Hospital

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